

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.D.		10/26/99
O.I.P.E. CLASSIFIER	C	49	10/30/99
FORMALITY REVIEW	10	69916	11/9/99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	1	1	10/26/99
2	2	2	10/26/99
3	3	3	10/26/99
4	4	4	10/26/99
5	5	5	10/26/99
6	6	6	10/26/99
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Claim	Final	Original	Date
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100	100	100	10/26/99

Claim	Final	Original	Date
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147	147	147	10/26/99
148	148	148	10/26/99
149	149	149	10/26/99
150	150	150	10/26/99

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If more than 150 claims or 10 actions
 staple additional sheet here

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